

22 JAN 59  
CR.

ROYAL BOROUGH OF NEW WINDSOR



ANNUAL REPORT  
OF  
MEDICAL OFFICER OF HEALTH  
1957



Digitized by the Internet Archive  
in 2018 with funding from  
Wellcome Library

<https://archive.org/details/b3028384x>

# ROYAL BOROUGH OF NEW WINDSOR



To The Mayor, Aldermen and Councillors  
of the Royal Borough of New Windsor.

Mr. Mayor, Ladies and Gentlemen,

In presenting to you my long delayed report for 1957 the most obvious current topics which come to mind are - Cancer, Poliomyelitis, Mental Disorder and Radio Activity, which will be discussed in the body of the report.

At the same time it appears that the field of medicine is tending to become more and more involved in political considerations and, while this may be inevitable for financial reasons, any association in political rivalries is to be deprecated. The national press also is far from blameless in its effect on our daily work. It is impossible, at least for most people, to be well informed in each of a wide variety of sciences. The call of the press for a well informed public does not in fact occur and all that often results is a bewildered and sometimes rather alarmed public. These comments are particularly applicable to poliomyelitis both before and after the introduction of the vaccine.

It could be that the work of experts is hampered and the action of administrators influenced not by what is best for the community but by views which may be expressed in certain circumstances by prominent citizens and particularly by the national press.

It is the particular appreciation and request, therefore, that I wish to thank all members of the Council for their understanding and co-operation, and to my fellow officers and all the staff for the team work which produces what I believe to be good public relations and a good service locally to the community.

I am,

Your obedient Servant,

S. J. McCLATCHEY,

M.B., B.Ch., B.A.O., D.P.H.

Medical Officer of Health.

PUBLIC HEALTH COMMITTEE

Chairman . . . . Councillor W. A. RAINE  
 Vice-Chairman . . . . Councillor H. H. BASFORD  
 The Mayor . . . . Alderman H. A. BARNEY

Members

Cllr. F. C. BOWYER	Cllr. Mrs. M. M. PRESSEY
Cllr. B. J. EALES	Cllr. F. W. ROEBUCK
Cllr. P. N. GARNER	Cllr. C. G. STOVELL
Cllr. J. GOULDING	Cllr. Dr. J. G. TURNER

WINDSOR AREA SUB-COMMITTEE OF THE  
BERKSHIRE COUNTY HEALTH COMMITTEE

Chairman . . . . Councillor W. A. RAINE  
 Vice-Chairman . . . . Councillor H. H. BASFORD

County Council Representatives

Cty. Cllr. Mrs. R. M. CARR  
 Cty. Cllr. J. T. CLARKE

Windsor Borough Council Members

All Members of the Public Health Committee

Co-opted Members

Dr. J. CLAYTON                      Dr. K. WALTER

STAFF OF THE PUBLIC HEALTH DEPARTMENT

Medical Officer of Health

S. J. McCLATCHEY, M.B., B.Ch., B.A.O., D.P.H.

Public Analyst (part time)

THOMAS McLACHLAN, A.C.G.F.C., F.R.I.C.

Chief Public Health Inspector

F. BARKER, C.S.I., Certified Meat Inspector

Additional Public Health Inspectors

J. M. A. FABEL, C.S.I., Certified Meat Inspector (Resigned 22.9.57)

J. F. LEAH, C.S.I., Certified Meat Inspector (Resigned 24.3.57)

J. W. PARTON, C.S.I. (Appointed 13.5.57)

B. P. DENYER, C.S.I., Certified Meat Inspector (Appointed 7.10.57)

Senior Health Visitor

Miss A. I. McALLISTER, S.C.M., Cert. San. Insp., H.V. Cert.

Health Visitors

Miss C. R. BISHOP, S.R.N., S.C.M., H.V. Cert.

Miss A. MELLISH, S.R.N., S.C.M., H.V. Cert.

Mrs. J. M. M. KEEN, S.R.N., S.C.M., H.V. Cert.

Chief Clerk : Miss D. E. ROGERS

Clerical Staff

Miss R. C. HUNT

Mrs. B. HALEY

Miss J. PURCHASE (Resigned 28.9.57)

Miss P. MUNDY (Appointed 30.9.57)

General Assistant : Mr. S. HOWARD



LIST OF CLINICS IN WINDSOR

under the control of the  
WINDSOR AREA HEALTH SUB-COMMITTEE

Clinic	Windsor	Clewer
Ante-Natal and Post-Natal	Fortnightly - Monday afternoon	-
Mr. Finlaison's Ante-Natal and Post-Natal	Third Tuesday morning in the month	-
Immunisation & Vaccination	Once every four weeks (Wednesday morning)	Once every four weeks (Wednesday morning)
Child Welfare	Wednesday) 2-4.30 Friday ) p.m.	Tuesday ) 2-4.30 Thursday) p.m.
Toddlers only	First Wednesday in the month, 2-4.30 p.m.	First Thursday in the month, 2-4.30 p.m.

Before going into the details of this report four foremost public health matters are worthy of some consideration.

### CANCER

In considering prevention of cancer one must know the cause and remove it or make it harmless. This has in fact been done in a number of cancers chiefly in the industrial field but in the total cancer problem it is a very limited contribution.

Different forms of cancer must therefore be considered and treated individually. Where the cause is known, prevention may be possible, but where the cause is uncertain or unknown, early diagnosis and treatment must be the aim. Here, however, one major difficulty occurs. Certain important forms of cancer give little or no sign of their presence in the early stages and, by the time diagnosis can be made, adequate treatment is impossible. This unfortunately occurs only too frequently even when there has been a minimum of delay in seeking advice and in a diagnosis being made.

In considering any programme of health education with regard to cancer one must very carefully consider what is to be gained against a possible cancer phobia which publicity may raise in some minds. In our present state of knowledge it is uncertain just how much publicity should be given to cancer but once any encouragement in cancer prevention can be offered, the public may be expected to respond in a sane and balanced manner. Such is the good relationship which is now being built up in most communities in the matter of health education.

Much has been written and made public on the problem of lung cancer and, whether or not all the claims and counter claims are true, there exists the undeniable fact that there is a greater incidence in lung cancer when cigarette smoking has been heavy over a prolonged period. The fact that heavy cigarette smoking in women 30 years ago was much less common and there are therefore few women with a prolonged smoking habit, may account for the low incidence of lung cancer in women at present.

It is clear however that the youth of to-day should be discouraged from smoking cigarettes and a programme to this effect is being considered for schools. Parents and all who come in contact with youth must not only discourage smoking but set an example. The banning of advertisements has been raised and is certainly worth consideration.

### POLIOMYELITIS

Poliomyelitis is news. The bright and hopeful news is of possible control of the disease.

Formerly the national press did a disservice each year by worrying the public unnecessarily when a few cases of Poliomyelitis occurred. More recently much publicity was given to the very limited supplies of vaccine, and also to the pros and cons of imported vaccine. In the end the public were quite bewildered by what in many cases may have been genuine attempts to place all the facts before them. There was, however, an overall feeling that the commencement of the vaccination programme was rushed due to political pressure, but the majority of the public were content to be advised by their experts in Public Health. It was most gratifying to find that, in spite of press and other news bombardment, the public showed a patient attitude towards the early limited supplies and later came to accept the more plentiful supplies of imported vaccine as recommended.

It is also felt that more warning should be given to Medical Officers of Health before announcements are made to the press by the Ministry of Health. It is always advisable for a Medical Officer of Health to peruse the morning paper for Ministry of Health announcements or for statements by the Minister of Health himself before going to his office where relevant enquiries almost certainly arise during the day.

As for questions asked in the House of Commons, one cannot but have sympathy with the Minister of Health who must often weigh political implication with the advice given to him by his medical experts.

### MENTAL HEALTH

This vast subject which is now to the fore in the public health field can only be touched upon in this report but work in the department is continually being adjusted to devote more time to health and particularly mental health education. It is in fact a way of life which has to be suggested to combat the stress from what, for most people now, is an increased tempo of life.

Financial worries, marital difficulties and boredom, often inter-related, are probably the major causes of anxiety or worry but there is undoubtedly an underlying inherited predisposition which renders some individuals more liable to "crack up" under stress. This predisposition is a blend of inherited characteristics and effect of early environment,



and one can certainly do much to advise parents in providing the most satisfactory environment within their resources. As each generation goes by parents themselves should become more balanced in their outlook and be the more able to tread the middle path in their relationship towards their children. The aim should be a balance of strictness and laxity, a personal example in relationship towards the marriage partner, and towards social contacts outside the family.

It seems absurd that much of the stress of modern life is due to international tension which forces nations to spend an unreasonable proportion of revenue on advance in science, devoted to national defence. Such an unbalancing of the nation's budget leads to unbalance in the budget of the community and of the individual. Can it be assumed, however, that higher wages and salaries would make for contentment even if the cost of basic necessities ceased to rise? It must be appreciated that in spite of individual hardships there is greater good for a greater number than ever before.

It is all too often forgotten that many of the commodities and acquisitions thought to be essential to-day would have been relative luxuries as little as 20 years ago. Mental Health therefore, as already suggested, depends largely on a way of life. It seems that the churches alone are unable to instil this thought throughout the entire community and public health workers must respond to the challenge. Complacency or despair may be alternatives to ambition and failure, but success in ambition often concentrates on a very limited field in life. The idealism of youth must mature into the acceptance of what already is good, and the added hope and endeavour towards improvement in that which is not. Tolerance and understanding are more likely as one matures and the middle path philosophy has much to commend it.

### RADIOACTIVITY

What does "Radio Active Hazard" mean to all but the few who are dealing daily with this highly specialised field of science and technology? Perhaps the pessimist sees destruction by the hydrogen bomb, but let it be hoped that the majority are of the optimistic view who see the hazard as the limited and controllable one associated with the peaceful use of atomic power which may well be the greatest scientific achievement that has ever been known for the good of man.

It is not generally appreciated the great advances which have been made by the use of radioactive materials in industry and medicine, but those who are responsible for the health of any community must seek and must be given information as to what use is being made of these materials in that

community. The incident at Windscale power station served as timely warning that safety must not be decided by scientists alone. The health authorities in the area had little idea as to the degree of danger which existed and the public relationship was badly handled. Community safety must not be shrouded by "security" and the public health authorities must make a firm stand so that Medical Officers of Health are given sufficient information to form some idea of the degree of risk which exists.

As regards other sources of radioactivity, far too much loose talk is heard of the dangers of the use of X-Rays for example, and naturally a number of people are alarmed unnecessarily. This is largely due to lack of sufficient knowledge and publications in the national press of ill-informed comment.

Sufficient comment now is to state that in medical diagnosis and treatment special consideration is given to the comparatively low levels of radioactivity involved and there is no need for one to have any fear of ill-effect in this respect. In industry, where individuals may be in more constant contact with radioactive materials, adequate precautions are being taken.

No great source of hazard exists outside the government establishments and the public health authorities in those areas must be on the alert and be given all the information needed to form an opinion as to the safety level.

To quote Cecil Gordon -

"It is perhaps a macabre commentary that the scale and extent of man made radiations through medical usages might have gone unnoticed, or at any rate unestimated, but for the follow up of the medical results of the tactical exercise with fission bombs at Nagasaki and Hiroshima revealing the increased leukaemia rate with exposure."

VITAL STATISTICS

Area (in acres) ... ..	4,616
Home Population (Registrar-General's Estimate mid-year 1957) ... ..	25,930
Number of Inhabited Houses 1957 (estimated) ... ..	6,692
Rateable value at 1st April, 1957 ... ..	£334,357
Sum represented by a Penny Rate ... ..	£1,337

Causes of Death in the Borough during 1957

	<u>Male</u>	<u>Female</u>
Tuberculosis, respiratory ... ..	1	-
Tuberculosis, other ... ..	1	1
Syphilitic Disease. ... ..	1	-
Diphtheria... ..	-	-
Whooping Cough ... ..	-	-
Meningococcal Infections. ... ..	-	-
Acute Poliomyelitis ... ..	-	-
Measles ... ..	-	-
Other Infective & Parasitic Diseases. ... ..	-	1
Malignant Neoplasm, Stomach ... ..	1	3
" " Lung, Bronchus... ..	5	1
" " Breast ... ..	-	7
" " Uterus ... ..	-	-
Other Malignant & Lymphatic Neoplasms ... ..	13	12
Leukaemia, Aleukaemia ... ..	1	-
Diabetes ... ..	-	3
Vascular Lesions of Nervous System... ..	15	24
Coronary disease, Angina. ... ..	20	18
Hypertension with Heart Disease ... ..	-	4
Other Heart Disease ... ..	14	10
Other Circulatory Disease ... ..	9	8
Influenza ... ..	1	2
Pneumonia ... ..	5	8
Bronchitis... ..	10	3
Other Diseases of Respiratory System. ... ..	-	-
Ulcer of Stomach and Duodenum.. ... ..	3	1
Gastritis, Enteritis & Diarrhoea ... ..	-	3
Nephritis & Nephrosis ... ..	-	1
Hyperplasia of Prostate.. ... ..	3	-
Pregnancy, Childbirth, Abortion ... ..	-	1
Congenital Malformations. ... ..	1	-
Other Defined and Ill-Defined Diseases ... ..	8	11
Motor Vehicle Accidents.. ... ..	2	1
All Other Accidents ... ..	1	3
Suicide ... ..	1	2
Homicide and Operations of War. ... ..	-	-
Total	116	128

Infant Deaths

						<u>Male</u>	<u>Female</u>
Total Deaths of Infants under 1 year..	...	...	...	...	...	7	1
Legitimate ...	...	...	...	...	...	6	1
Illegitimate..	...	...	...	...	...	1	-
Total Deaths of Infants under 4 weeks.	...	...	...	...	...	5	1
Legitimate ...	...	...	...	...	...	5	1
Illegitimate..	...	...	...	...	...	-	-
						<u>Windsor</u>	<u>England &amp; Wales</u>
Death Rate per 1,000 population.	...	...	...	...	...	9.4	11.5
Infant Mortality Rate	...	...	...	...	...	20.3	23.0

Births

						<u>Live Births</u>		<u>Stillbirths</u>	
						<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
Total...	...	...	...	...	...	201	193	6	1
Legitimate ...	...	...	...	...	...	187	179	5	1
Illegitimate..	...	...	...	...	...	14	14	1	-
								<u>Windsor</u>	<u>England &amp; Wales</u>
Birth Rate per 1,000 population	...	...	...	...	...	15.2	16.1		



INFECTIOUS DISEASES:THEIR PREVALENCE AND CONTROLNotifications

	Under 1 yr	1 to 2	3 to 4	5 to 9	10 to 14	15 to 19	20 to 34	35 to 44	45 to 64	65 and over	Total noti- fied	Sent to hosp- ital
Dysentery	-	-	-	1	1	-	1	-	-	-	3	-
Food Poisoning	-	-	-	1	-	-	-	-	-	1	2	-
Meningococcal Infection	1	-	-	-	-	-	-	-	-	-	1	1
Pneumonia	-	-	-	-	-	4	1	1	4	2	12	-
Scarlet Fever	-	1	-	-	1	-	-	-	-	-	2	1
Measles	5	48	67	120	2	1	-	-	-	-	243	-
Whooping Cough	-	-	-	2	-	-	-	-	-	-	2	-

There has been no unusual feature among the notifications and we were fortunate again in having no cases of Poliomyelitis. In the future it is of course expected that the effect of immunisation against this disease will become evident over the country as a whole. Isolated cases must be expected from time to time but much will depend on the response of the public when immunisation is offered to the adult population.

In the autumn, however, the epidemic of Asian Influenza, which was moving over the country, came to Windsor. Rather belated efforts were made to immunise certain groups of the population, including medical and nursing staff, ambulance personnel and home helps. How effective this was, in fact, appears uncertain.

The epidemic was spreading southwards and clear evidence of it appeared in Windsor about the second or third week in September. Apart from isolated cases the first evidence of mass involvement appeared in school children, chiefly affecting those between 9 and 13 years of age. Within a week, however, the infection had apparently spread to all age groups. It was difficult to say how many of the school children were affected as obviously many stayed at home with what might have been called feverish colds, and definite diagnosis of Asian 'flu would have been doubtful. An approximate percentage of the school population affected was probably about 50%.

In contrast to most other areas the education authorities in Berkshire decided to close the schools where more than 20% were absent with illness suggestive of Asian 'flu. It is doubtful if this action had the slightest effect on the course of the epidemic in urban districts. As far as the school children were concerned the worst of the epidemic was over after four weeks but the closure of schools at varying periods caused considerable needless confusion.

There then appeared to be a slight lull of some three or four weeks before the peak of the infection was reached in the adult population. This was chiefly during October, but here it seemed that a much smaller proportion of the population was affected. Fairly accurate figures from the army garrison gave one attack rate of just under 25%, although it was quite high in young recruits who were housed in rather cramped conditions.

### Tuberculosis

#### New Cases and Mortality during 1957

Age Groups	New Cases				Deaths			
	Respiratory		Non-Resp.		Respiratory		Non-Resp.	
	M	F	M	F	M	F	M	F
0 years	-	-	-	-	-	-	-	-
1 year	-	-	-	-	-	-	-	-
5 years	-	-	-	-	-	-	-	-
15 years	3	-	-	-	-	-	-	-
25 years	2	-	-	1	-	-	-	-
35 years	-	2	-	-	-	-	-	-
45 years	2	2	-	-	-	-	-	-
55 years	-	1	-	-	-	-	-	-
65 and upwards	1	-	-	1	1	-	-	-
Totals	8	5	-	2	1	-	-	-

During the year there were 8 inwards transfers, 13 outward transfers and 5 recoveries reported, giving a total of 219 cases on the register at the end of 1957.

CARE OF MOTHERS AND YOUNG CHILDRENAnte-Natal & Post-Natal Care

Number of expectant mothers who attended Local Health Authority's ante-natal clinic	...	...	71
Of these, unmarried mothers totalled.	...	...	20
Number of Windsor home confinements attending ante-natal clinic.	...	...	31
Total number of home confinements	...	...	106

Number of mothers who attended Local Health Authority's post-natal clinic.	...	...	15
--	-----	-----	----

			<u>No. of Windsor cases confined</u>
Princess Christian Maternity Home	...	...	83
Old Windsor Hospital	...	...	165
Registered Maternity Homes	...	...	9
Colinswood Maternity Home, Farnham Common..)			
Upton Hospital, Slough... ..)			46
Canadian Red Cross Hospital, Taplow.. ..)			

Perinatal Mortality

Stillbirths and neonatal deaths are now more commonly grouped together as perinatal deaths because in the majority of cases some abnormality either before or during labour is the cause of death or a contributory factor to death or stillbirth.

Stillbirths in Black

Neonatal deaths in Red

	Booked & Confined in Hosp. or Nursing Home on Social Grounds	Booked & Confined in Hosp. on Medical Grounds, or * Admitted to Hospital as Medical Emergency	Confined at Home (only 25% of all births)
P r e m a t u r e	Macerated - A.P.H.	* Extreme prematurity (25 weeks). History of previous miscarriages & subfertility. Died in a few minutes.	Macerated Wt. 4.6 $\frac{1}{2}$ .
	Macerated - Wt. 3.1.	* Maternal Toxaemia. Wt. 5.1. Small placenta with large clot.	
	Severe Maternal Toxaemia, Surgical induction, Wt. 4.12. F.H. heard during labour.	One of twins. Wt. 1.3. Died after 7 hours. Mother had rheumatic heart disease.	
	Broncho-pneumonia, Premature Membrane Rupture, Prolapse of cord. Wt. 3.8. Died at 2 days.		
F u l l  T e r m	Admitted with A.P.H. Wt. 3.0.		
	Wt. 3.9 (No details available)		
	Wt. 6.0. Died after 2 days. Second of twins- breech. Moderate maternal toxæmia. Cause of death (Atelec- tasis) unsatisfactory. (Private Nursing Home)	* Admitted for induction ? early foetal distress. Slight maceration. Wt. 7.2.	Wt. 6.8. Broncho- pneumonia Died after 2 days.
	Wt. 6.0. Hydrocephalus, Some Maceration		

Wt. 3.1. = Weight 3 lbs. 1 oz.  
A.P.H. = Ante Partum Haemorrhage  
F.H. = Foetal Heart



This table may appear a little complicated at first and no attempt is made to draw conclusions from a small number of cases in any one year.

In the case of stillbirths an attempt has been made to show any relevant factors which may have been a cause of the still-birth, although in many cases adequate information even with post mortem examination is not always possible.

These results added to those of three previous years give a more reasonable total on which to form a modest judgment and it is still evident that Prematurity, Maternal Toxaemia and Maceration of the Foetus are commonly found. It is hoped that the recent study of perinatal deaths by the Medical Research Council will throw a little light on the problem when the results are published.

It is worth recording again that there is no definite evidence to suggest that a home confinement carries any greater risk to the infant when during the ante-natal period there appears no medical reason for hospital confinement.

#### Infant Deaths

(Over 4 weeks and under 1 year)

1. Died at 5 months with toxæmia and bronchopneumonia in addition to congenital defects (Hydrocephalus and Melingomyelocoele)
2. A mongolian idiot died at 6 months with bronchopneumonia.
3. A case of congenital heart disease died at 3 months with bronchopneumonia.
4. Died at 2 months with "virus pneumonia". In this case the infant was a poor feeder in the early stages and mismanagement as a contributory factor cannot be ruled out.

#### Health Visitors

There is little to add to the report of last year in this work except that the trend is continuing towards selective visiting with some reduction in routine visiting. Health education continues to be a major part of the health visitors' work while the tendency to include more mental health education and advice continues.

At fortnightly sessions the Medical Officer of Health, the Psychiatrist and Psychiatric Social Worker discuss family problems with the Health Visitors to whom opinion is given for further investigation or for actual advice to parents. The Health Visitor acts as a case seeker with the object of bringing to light early problems before they become established. Advice to the Health Visitor regarding her particular case problems means that she herself can transmit this advice and guidance to a family without involving another visitor to the home, and it has already been found that the majority of cases can be treated without reference to the Child Guidance Clinic. It is hoped that family doctors will in due course join in this work and extend further their use of the Health Visitors' services. Head teachers already avail themselves of the help this arrangement offers.

### Child Health Centres

#### (Infant Welfare Clinics)

Number of Births. ....	394
Number of new attenders under 1 year of age ...	447
Number of new attenders between 1 - 5 years ...	59
Total number of attendances - Windsor ...	4292
Clewer ...	<u>3658</u> 7950

There appears little in Windsor to support those with doubts as to the further usefulness of the "Child Health Centres". The number of new attenders under 1 year of age was again higher than the annual birth rate. This is accounted for by a number of new families moving into the area, especially army families, and by a number coming from outside the borough. It does however show that the vast majority of babies born in the town do in fact make use of the clinic services. Experience shows that, of those who attend, many are regular attenders while under 2 years of age. It is felt that the modest financial advantage of buying some proprietary foods at the clinic is not a marked inducement and that all attend the clinic for the service and friendship it offers. This should apply to all such clinics which are aesthetically agreeable yet homely and are staffed by health visitors of up-to-date thought and training, who are aware of the opportunities for health education.

A service which is often given too little thought but which is most important to family doctors and hospital paediatricians is provided at these clinics. When one considers the number of mothers who are reassured regarding minor complaints or even some normal variation in their children, one realises the added burden and unnecessary use of time which might fall to the lot of the family doctor if it was not for the clinics. There are a few idealistic family doctors who prefer to organise their own baby

clinics and this attitude is respected, but the majority simply have not time for this type of work and indeed not all will have the wish or experience to undertake it. The Public Health Service must still provide the preventive health service where it is not provided from some other source and certainly at present there is no serious attempt, except by the few, from colleagues in general medical practice.

The time of the hospital staff is also saved, though to a lesser extent. One orthopaedic surgeon, for instance, has stated that 70% of the children referred for orthopaedic opinion had only minor deviations from the average which needed no form of treatment. The paediatrician's time can also be saved by the advice given at the local authority clinic by an experienced public health doctor. Much is to be said also for the exchange of clinic doctors and junior hospital doctors as well as attendance of health visitors at paediatric clinics. It has now been the practice for some years here to have periods when a suitable junior hospital doctor can attend the child health centres, and the health visitors' liaison with the paediatric clinic continues to be invaluable.

<u>Immunisation</u>			
		<u>Primary</u>	<u>Booster</u>
		<u>Whooping Cough</u>	<u>Diphtheria</u>
		<u>Diphtheria</u>	<u>Diphtheria</u>
Total number immunised	... 407	359	512
Number aged 0-4 years (inclusive)	390	331	-
Number aged 5-10 years (inclusive)	3	14	388
Number aged 11-15 years (inclusive)	-	-	124
Immunised by family doctors.	... 14	14	-

<u>Vaccination</u>			
During 1957 vaccination of children			
under 1 year totalled..	... 233		
1 - 5 years.	... 8		
5 - 15 years	... 12		
Adults	... 9		
Vaccinated by family doctors..	... 15		

#### DOMESTIC HELP SERVICE

Number of part-time Domestic Helps employed	
at the 31st December, 1957...	55
Number of cases served during the year	192
Number of hours worked	31,537



The statistics suggest that the service is now becoming more stabilised. The figures vary very little from those of last year and although at times it has been difficult to find a home help who can give a few more hours work, it has also been found on occasions that a few women have been waiting for work as home helps. This does not occur frequently but there is a fair balance of demand and supply. To some extent the situation has improved by the frequent follow-up of cases to decide if less help is needed and this has been possible by the appointment of a part-time visitor.

It must not be assumed, however, that every demand on the service is met. The principle is to allocate the minimum number of hours necessary to ensure that no unreasonable hardship is suffered by anyone due to illness or infirmity in themselves or their family. Much is still expected from friends and relatives in assisting those who are unable adequately to care for themselves but the Domestic Help Service shares the responsibility. In a minority of cases a considerable amount of help is provided especially when an illness appears to be terminal. In such cases great difficulty has been found at times in arranging adequate care at night when it has been unreasonable for an old and dying person to be left alone. The alternative would be admission to hospital but, although some attention and comfort is desired, no great medical or nursing skill is necessary and, even if hospital accommodation was available, the provision of a night sitter with a patient at home would be more economical than admission to hospital.

Here one sees the narrow dividing line between the responsibility of the hospital board and the local authority, but when there is any doubt surely the more economic way is commendable irrespective of who meets the cost?

### HOUSING

The following houses were erected during the year -

(1) By the Local Authority	...	6
(2) By Private Enterprise	...	128

### Housing : Inspections, etc.

Information with regard to action taken under the Housing Act 1936, during the year is set out in the form below as required by the Minister of Health:



1. Inspection of Dwellinghouses during the Year.

(1) (a) Total number of dwellinghouses inspected for housing defects (under the Public Health or Housing Acts) ... ..	152
(b) Number of inspections made for the purpose. ...	1327
(2) (a) Number of dwellinghouses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932 ... ..	73
(b) Number of inspections made for the purpose. ...	1215
(3) Number of dwellinghouses found to be in a state so dangerous or injurious to health as to be unfit for human habitation... ..	43
(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation. ... ..	93

2. Remedy of Defects during the Year without Service of Formal Notices.

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their officers.. ...	70
--	----

3. Action under Statutory Powers during the Year.

(A) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936:

(1) Number of dwellinghouses in respect of which notices were served requiring repairs.. ...	15
(2) Number of dwellinghouses which were rendered fit after service of formal notices:	
(a) By Owners ... ..	23
(b) By Local Authority in default of owners ...	2

## (B) Proceedings under Public Health Acts:

- (1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied... .. 2
- (2) Number of dwellinghouses in which defects were remedied after service of formal notices:
- (a) By Owners ... .. 2
- (b) By Local Authority in default of owners ... 0

## (C) Proceedings under Sections 11 and 13 of the Housing Act, 1936:

- (1) Number of dwellinghouses in respect of which Demolition Orders were made.. ... 3
- (2) Number of dwellinghouses demolished in pursuance of Demolition Orders... .. 3
- (3) Number of Undertakings accepted from owners not to re-let when premises become vacant ... 0
- (4) Number of Undertakings cancelled by Local Authority after premises had been rendered fit. 3

## (D) Proceedings under Section 12 of the Housing Act, 1936:

- (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made. ... .. 2
- (2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been made fit... .. 2

## (E) Proceedings under Section 10 of the Local Government (Miscellaneous Provisions) Act, 1953:

- (1) Number of houses in respect of which Closing Orders were made. ... .. 2
- (2) Number of houses in respect of which Closing Orders were determined, the houses having been made fit ... .. 1

4. Housing Act, 1936 - Part IV - Overcrowding.

Figures received from the Borough Treasurer show that at the 31st December, 1957, there were 509 names on the waiting list for Council houses and that the number of families rehoused during the year were as follows:

Rehoused from waiting list...	...	...	...	...	32
Rehoused from condemned property...	...	...	...	...	1
Total					33

Families rehoused during 1956 numbered 86.

Housing Act, 1949

Number of applicants for improvement grants	...	...	45
Number of improvement grants approved	...	...	44
Number of applications for loans to execute repairs..			20
Number of loans approved	...	...	20

Housing Repairs and Rents Act, 1954Certificates of Disrepair

Number of Applications	Number Granted	Number Refused	Number of Applications for Revocation of Certificates.	Number Granted	Number Refused
9	9	-	2	1	1

Butchers' Shops (Wholesale and Retail)

The following articles of food from Butchers' Shops and other premises were condemned for the reasons stated:

Home KilledABSCESS

Liver (Bovine)	11	lbs.	
Pork (Leg)	<u>6</u>		17 lbs.

DECOMPOSITION

Ducks	19		
Lamb	126		
Plucks (Pigs)	45		
Sweetbreads	<u>2</u>		192 lbs.

PARASITIC

Liver (Bovine)	51		
Lungs (Bovine)	10		
Lungs (Sheep)	<u>2</u>		63 lbs.

TUBERCULOSIS

Pigs Head	<u>9</u>		9 lbs.
-----------	----------	--	--------

ImportedDEGENERATION

Liver (Bovine)	<u>10</u>		10 lbs.
----------------	-----------	--	---------

DECOMPOSITION

Beef	106		
Lamb	16		
Liver (Lambs)	<u>31</u>		153 lbs.

MOULDS

Beef	<u>54</u>		<u>54 lbs.</u>
------	-----------	--	----------------

TOTAL			<u>498 lbs.</u>
-------	--	--	-----------------



Other Food Premises

The following is a list of the food condemned at other food premises:

Butter	...	...	...	...	1 lb.	
Cakes.	...	...	...	...	6	
Cheese	...	...	...	...	335	
Cooked Meats	...	...	...	...	8	
Cream.	...	...	...	...	2	
Dried Fruit.	...	...	...	...	15	
Eggs..	...	...	...	...	2	
Fish (Fresh)	...	...	...	...	140	
Frozen Fish.	...	...	...	...	23	
Ice Cream...	...	...	...	...	2	
Icing Sugar.	...	...	...	...	1	
Pies..	...	...	...	...	6	
Poultry	...	...	...	...	125	
Sausages	...	...	...	...	36	
Waffles	...	...	...	...	<u>2</u>	704 lbs.
<u>Bottled Foods</u>						
Pickles etc.	...	...	...	...	54	
Preserves...	...	...	...	...	<u>7</u>	61 lbs.
<u>Tinned Foods</u>						
Beverages...	...	...	...	...	3	
Cereals	...	...	...	...	6	
Cream.	...	...	...	...	1	
Fish..	...	...	...	...	23	
Fruit.	...	...	...	...	360	
Fruit Juices	...	...	...	...	6	
Ham...	...	...	...	...	174	
Meat..	...	...	...	...	493	
Milk..	...	...	...	...	100	
Sausages	...	...	...	...	64	
Soups.	...	...	...	...	16	
Preserves...	...	...	...	...	7	
Puddings	...	...	...	...	1	
Vegetables..	...	...	...	...	<u>350</u>	1604 lbs.
Total					...	<u>2369 lbs.</u>

These foods were condemned for a variety of reasons, e.g. decomposition, blown tins, etc. The number of condemnations was 72. In most cases the attention of the Department was called to the unsound foods by the retailer.

MILKDistribution and Registration

The following are registered under the various Orders and Regulations:

Distributors of Milk	...	...	23
Dairymen	...	...	4

Eight distributors are licensed to sell Tuberculin Tested Milk, eight to sell Pasteurised Milk and nineteen to sell Sterilised Milk.

Special Designations

Phosphatase Test is a test to show the efficiency of pasteurisation and is dependent on the destruction of the enzyme phosphatase by "legal" pasteurisation temperatures. 0.25% of raw milk added to pasteurised milk can be detected in this way.

Methylene Blue Test depends on decolourisation of the dye by bacteria, if present, when added to milk. A sample of milk shall be regarded as satisfying the methylene blue reduction test if between the 1st May and the 31st October it fails to decolourise in  $4\frac{1}{2}$  hours, or if between the 1st November and the 30th April it fails to decolourise in  $5\frac{1}{2}$  hours.

Tuberculin Tested:

Number of samples taken...	...	18
Passed Methylene Blue Test	...	14
Failed Methylene Blue Test	...	4

Tuberculin Tested (Pasteurised):

Number of samples taken...	...	47
Passed both tests...	...	43
Passed Phosphatase Test (Methylene Blue Test void)	...	4

Pasteurised:

Number of samples taken...	...	41
Passed both tests...	...	38
Passed Phosphatase Test (Methylene Blue Test void)	...	3

NOTE: Void Tests - Methylene Blue tests should not be carried out by the laboratory if the shade temperature at which the samples have been kept exceeds 65°F.

Biological Examination:

Tuberculin Tested - 1 sample taken which passed test.

Bottle Rinse Test:

Number taken - 10. All passed test.

ICE-CREAM

The number of samples submitted to bacteriological examination was 30, which were classified by the Bacteriologist as under:

Grade I	...	...	20	...	...	66.66%
Grade II	...	...	10	...	...	33.33%

Of the above samples 19 were of ice-cream manufactured within the Borough, these being classified as under:

	Grade				
	I	II	III	IV	Total
Manufacturer A	4	-	-	-	4
Manufacturer B	-	1	-	-	1
Manufacturer C	-	1	-	-	1
Manufacturer D	1	3	-	-	4
Manufacturer E	2	1	-	-	3
Manufacturer F	3	3	-	-	6
Total	10	9	-	-	19

Although the total number of samples taken shows a reduction on previous years it is pleasing to note that all the samples were within Grades I and II.

Provisional grades of ice-cream are as follows:

Provisional Grade	Time taken to reduce methylene blue
I	4 $\frac{1}{2}$ hours or more.
II	2 $\frac{1}{2}$ - 4 hours.
III	$\frac{1}{2}$ - 2 hours.
IV	0 hours.

There is no legal standard for the grading of the Methylene Blue test of ice-cream, but those samples in Grade III raise grave doubt as to the efficiency in their manufacture or storage.

The following premises are registered under Section 14 of the Food & Drugs Act, 1938:

Ice-cream:

Manufacturers in operation	...	...	...	6
Storage and sale	...	...	...	69
Sale only	...	...	...	16
<u>Preserved Food..</u>	...	...	...	26

Bacteriological Examination of Other Foods

In addition to the control of milk and ice-cream, the following samples were submitted to the Public Health Laboratory for examination:

Artificial Cream	...	...	...	2
Cooked Meats..	...	...	...	8

Water Samples

Swimming Baths	...	...	...	4
Domestic Supplies...	...	...	...	2
Surface Water.	...	...	...	2

FOOD AND DRUGS

The following table shows the number of samples taken and submitted to the Public Analyst for analysis and the results of such analysis:

	Number Examined			Number Adulterated		
	Formal	Informal	Total	Formal	Informal	Total
Baking Powder..	-	1	1	-	-	-
Beef ...	-	1	1	-	-	-
Biscuits.	1	1	2	-	-	-
Bread ...	-	1	1	-	-	-
Bread Crumbs...	-	1	1	-	-	-
Butter...	3	-	3	-	-	-
Cereal Food (Canned).	-	1	1	-	-	-
Cheese, processed	1	-	1	-	-	-
Cod Liver Oil & Malt.	-	1	1	-	-	-
Cooking Fat ...	-	1	1	-	-	-
Curry Powder...	1	1	2	-	-	-
Curry Sauce ...	-	1	1	-	-	-
Cream ...	-	2	2	-	-	-
Cream of Tartar	-	1	1	-	-	-
Carried forward	6	13	19	-	-	-



Brought forward	6	13	19	-	-	-
Essence of Rennet ...	-	1	1	-	-	-
Fish Cakes ...	-	1	1	-	-	-
Fish, Canned...	-	2	2	-	-	-
Fish Paste ...	1	1	2	-	-	-
Flavourings & Essences	-	2	2	-	-	-
Glace Cherries ...	-	1	1	-	-	-
Glycerine, Lemon & Honey Sweets. ...	-	1	1	-	-	-
Glycerine & Black- currant Sweets ...	-	1	1	-	-	-
Ground Almonds. ...	2	4	6	-	-	-
Ground Cloves.. ...	-	1	1	-	-	-
Ground Ginger.. ...	-	1	1	-	-	-
Ground Mace ...	-	1	1	-	-	-
Ground Rice ...	1	-	1	-	-	-
Honey ...	-	1	1	-	-	-
Ice-Cream ...	-	6	6	-	-	-
Icing Sugar ...	-	1	1	-	-	-
Jam ...	3	-	3	-	-	-
Jamset... ...	1	-	1	-	-	-
Margarine ...	2	-	2	-	-	-
Marmalade ...	1	1	2	-	-	-
Milk ...	10	-	10	-	-	-
Mixed Spice ...	-	1	1	-	-	-
Mushroom Ketchup ...	1	-	1	-	-	-
Mushrooms, Canned ...	-	1	1	-	-	-
Olive Oil ...	-	1	1	-	-	-
Patum Peperium. ...	-	1	1	-	-	-
Pepper, White.. ...	-	2	2	-	-	-
Pork Kidneys, braised	-	1	1	-	-	-
Pork Sausage... ...	-	1	1	-	-	-
Sausage Rolls.. ...	-	6	6	-	-	-
Soft Drinks:						
Lemon Barley Water.	-	1	1	-	-	-
Orange Squash ...	-	1	1	-	-	-
Soft Drink Powder ...	-	2	2	-	-	-
Sweets and Sugar						
Confectionery ...	-	6	6	-	1	1
Table Jelly ...	2	1	3	-	-	-
Turkey, canned. ...	-	1	1	-	-	-
Vinegar.. ...	-	2	2	-	-	-
Wild Cherry Tablets..	-	1	1	-	1	1
Milk Bottle ...	-	1	1	-	-	-
TOTALS	30	69	99	-	2	2

Table of Adulterated Samples

Sample No.	Article	Formal or Informal	Nature of Adulteration	Observations
135	Wild Cherry Tablets	Informal	No disclosure of composition as required by Pharmacy & Medicines Act.	Public Analyst asked to refer to Pharmaceutical Society.
160	Fruit Cream Wafers	Informal	Product incorrectly described.	Manufacturers not willing to amend name of product. No further action taken.

Food Premises

Bakers and Confectioners	...	...	...	12
Butchers	...	...	...	20
Catering Establishments.	...	...	...	43
Chemists	...	...	...	6
Cooked Meats	...	...	...	2
Fish Fryers.	...	...	...	5
Fishmongers.	...	...	...	7
Greengrocers	...	...	...	22
Grocers and General	...	...	...	70
Hotels	...	...	...	7
Public Houses	...	...	...	66
Sugar Confectioners	...	...	...	31
Wholesale Meat Depots...	...	...	...	2
Wine Merchants	...	...	...	7
Works Canteens	...	...	...	4
				<u>304</u>

During the year it was found necessary to serve 19 informal notices on owners or occupiers of food premises. At the end of the year 9 of the above notices had been complied with together with 33 informal notices which had been served previously.

In addition in two cases it was necessary to call attention to the condition of vans transporting meat, the defects being remedied during the year.

FOOD BYELAWS

Generally the food traders are co-operative. Although it was not found necessary to take enforcement action the market traders required frequent reminders to display names and addresses as required by the byelaws and by the Food Hygiene Regulations, 1955.

ENVIRONMENTAL CONDITIONSCommon Lodging House

The common lodging house has been satisfactorily kept, and has given no cause for complaint.

Prevention of Damage by Pests Act

2,494 visits were paid to premises in connection with the destruction of rats and mice.

Test baiting of sewer manholes showed that once again only certain sections of the sewerage system were infested. The infested manholes were treated in April when 84 manholes were baited. In November a maintenance treatment was carried out when 82 manholes were treated using warfarin bait to which was added a mould inhibitor. Baiting at all manholes showing bait takes was continued until no takes were recorded.

Disinfection

Disinfection is carried out by the Windsor Group Hospital Management Committee at their disinfecting plants at Maidenhead Isolation and Old Windsor Hospitals.

During the year disinfections were as follows:

Articles of bedding and clothing disinfected	...	104
Articles of bedding and clothing destroyed..	...	-
Rooms disinfected...	... ..	8

Verminous PremisesBed Bugs

Council houses disinfested	...	...	...	...	3
Other houses disinfested..	...	...	...	...	9

Fleas

Council houses disinfested	...	...	...	...	2
Other houses disinfested..	...	...	...	...	4

Other Pests

Council houses disinfested	...	...	...	...	1
Other houses disinfested..	...	...	...	...	11

SANITARY DEFECTS AND NUISANCES

During the year 936 sanitary defects and nuisances were discovered, 224 informal and 47 formal notices were served requiring abatement of the defects or nuisances. At the end of the year 97 informal and 27 formal notices had been complied with. In addition 132 informal and 16 formal notices which were outstanding at the end of 1956 had been complied with.

COMPLAINTS

Absence of, or dilapidated dustbins...	...	...	...	...	19
Ants etc. ....	...	...	...	...	11
Beetles etc....	...	...	...	...	3
Drains, choked or defective	...	...	...	...	61
Eaves gutters etc...	...	...	...	...	14
Flies....	...	...	...	...	2
Food and Drugs	...	...	...	...	16
Housing defects	...	...	...	...	40
Keeping of animals..	...	...	...	...	7
Milk and Dairies	...	...	...	...	5
Movable Dwellings...	...	...	...	...	1
Offensive accumulation	...	...	...	...	10
Offensive smells	...	...	...	...	25
Overcrowding..	...	...	...	...	3
Pigeons.	...	...	...	...	4
Rodents - Rats	...	...	...	...	202
Mice	...	...	...	...	94
Smoke...	...	...	...	...	9
Verminous Premises - Bugs.	...	...	...	...	13
Fleas	...	...	...	...	4
Wasps....	...	...	...	...	98
Water Closets.	...	...	...	...	19
Water Supply..	...	...	...	...	1
Miscellaneous.	...	...	...	...	1



FACTORIES ACT, 1937 & 19481. INSPECTIONS for purposes of provisions as to health  
(including inspections made by Public Health Inspectors)

Premises	No. on Register	Number of		
		Inspections	Written Notices	Occupiers Prosecuted
(i) Factories in which Secs.1,2,3,4 & 6 are to be enforced	26	7	-	-
(ii) Factories not included in (i) in which Sec.7 is enforced	104	80	13	-
(iii) Other premises in which Sec.7 is enforced (excluding outworkers' premises)	20	18	2	-
TOTAL	150	105	15	-

## 2. CASES IN WHICH DEFECTS WERE FOUND

Particulars	Number of Defects				Prosecutions Instituted
	Found	Remedied	Referred to H.M. Inspector	Referred by H.M. Inspector	
Want of cleanliness	1	-	-	-	-
Sanitary conveniences					
(a) Insufficient	1	-	-	-	-
(b) Unsuitable or defective	14	9	-	-	-
Other offences against the Act (not including offences relating to outwork)	1	-	1	-	-
TOTAL	17	9	1	-	-

MEANS OF ESCAPE IN CASE OF FIRE

Various factories and other premises have been inspected and notices served for the provision of proper means of escape in case of fire. Before any notice is served, the co-operation of the Fire Service is sought.

Informal notices served	...	...	...	...	41
Formal notices served..	...	...	...	...	5
Informal notices complied	...	...	...	...	18
Formal notices complied	...	...	...	...	3
Certificates issued under the Factories Act	...				10

LEGAL PROCEEDINGS

1. Milk distributor fined £15 for failing to ensure that a milk bottle was thoroughly cleansed before use - Milk and Dairies Regulations.
2. Proprietor of a shop fined £1 for contravention of Section 47 of the Shops Act 1950. (Open for sale of postcards and souvenirs).
3. Proprietor of a shop fined £1 for contravention of Section 47 of the Shops Act 1950, (open for sale of postcards and souvenirs) and a further £1 for contravention of Section 22 of the Shops Act 1950, (record of Sunday employment).

Letters of warning were sent during the year in respect of the following:-

1. In respect of a milk bottle which had not been thoroughly cleansed.
2. In respect of a sponge cake which was found to contain bristles.

## SUMMARY OF INSPECTIONS

Agricultural Act	...	...	...	...	...	...	3
Common Lodging House..	...	...	...	...	...	...	2
Drainage..	...	...	...	...	...	...	443
Dwellinghouses -							
Disinfection..	...	...	...	...	...	...	4
Housing Act Inspections...	...	...	...	...	...	...	73
" " Re-inspections	...	...	...	...	...	...	1215
Housing re Applications...	...	...	...	...	...	...	15
" re Improvement Grants...	...	...	...	...	...	...	9
" re Rent Act.	...	...	...	...	...	...	38
Infectious Disease..	...	...	...	...	...	...	1
Overcrowding..	...	...	...	...	...	...	5
Public Health Act Inspections (Housing)	...	...	...	...	...	...	79
" " " Re-inspections (Housing) ..	...	...	...	...	...	...	102
" " " Inspections (other than Housing)	...	...	...	...	...	...	204
" " " Re-inspections (other than Housing)	...	...	...	...	...	...	177
Verminous Premises, Council Houses	...	...	...	...	...	...	5
" " Other Houses	...	...	...	...	...	...	5
Factories -							
Mechanical Inspections	...	...	...	...	...	...	80
" Re-inspections.	...	...	...	...	...	...	48
Non-Mechanical Inspections	...	...	...	...	...	...	7
" " Re-inspections...	...	...	...	...	...	...	5
Outworkers	...	...	...	...	...	...	9
Fireguards Act..	...	...	...	...	...	...	6
Food and Drugs -							
Bakehouses	...	...	...	...	...	...	12
Catering Establishments...	...	...	...	...	...	...	251
Dairies etc...	...	...	...	...	...	...	9
Food Hawkers..	...	...	...	...	...	...	37
Food Shops	...	...	...	...	...	...	471
Food Transport and Handling	...	...	...	...	...	...	30
Ice-cream	...	...	...	...	...	...	16
Meat Depots...	...	...	...	...	...	...	485
Preserved Food	...	...	...	...	...	...	4
Samples taken.	...	...	...	...	...	...	248
Unsound Food - Condemnations	...	...	...	...	...	...	98
Hairdressers	...	...	...	...	...	...	47
Interviews	...	...	...	...	...	...	1142
Legal Proceedings	...	...	...	...	...	...	3
Market and Stalls	...	...	...	...	...	...	503
Means of Escape in case of Fire -							
Factory Act Inspections...	...	...	...	...	...	...	15
" " Re-inspections	...	...	...	...	...	...	47
Public Health Act Inspections...	...	...	...	...	...	...	51
" " " Re-inspections	...	...	...	...	...	...	162
Meetings Attended	...	...	...	...	...	...	15
Carried forward							6181

	Brought forward						6181
Merchandise Marks...	...	...	...	...	...	...	170
Movable Dwellings...	...	...	...	...	...	...	35
Other Pests...	...	...	...	...	...	...	75
Pet Animals Act ...	...	...	...	...	...	...	26
Piggeries and Stables ...	...	...	...	...	...	...	11
Places of Public Entertainment..	...	...	...	...	...	...	2
Public and Other Conveniences...	...	...	...	...	...	...	9
Rag, Flock and Other Filling ...	...	...	...	...	...	...	-
Rodent Control ...	...	...	...	...	...	...	3556
Schools Inspection..	...	...	...	...	...	...	3
Service of Notices..	...	...	...	...	...	...	174
Shops -							
Hours of Closing..	...	...	...	...	...	...	109
Other Inspections.	...	...	...	...	...	...	173
Smoke Observations..	...	...	...	...	...	...	32
Water Courses. ...	...	...	...	...	...	...	13
Water Samples. ...	...	...	...	...	...	...	6
Miscellaneous. ...	...	...	...	...	...	...	768
							<hr/>
							11343
							<hr/>





